

IMPROVEMENT PERMIT

20604

HTE 04-5-8602

Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin construction of any building at which a septic tank system is to be used for disposal of sewage without first obtaining a written permit from the Harnett County Health Department."

Name: (owner) Michael Anderson Homes INC New Installation Septic Tank
Property Location: SR# 1443 Lafayette RD Repairs Nitrification Line

Subdivision Victoria Hills II Phase 5 Lot # 163

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 Lot Size: 30,760 sq ft

Basement with Plumbing: Garage:
Water Supply: Well Public Community
Distance From Well: 50' ft.

Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system: Conventional Other 25% Reduction System

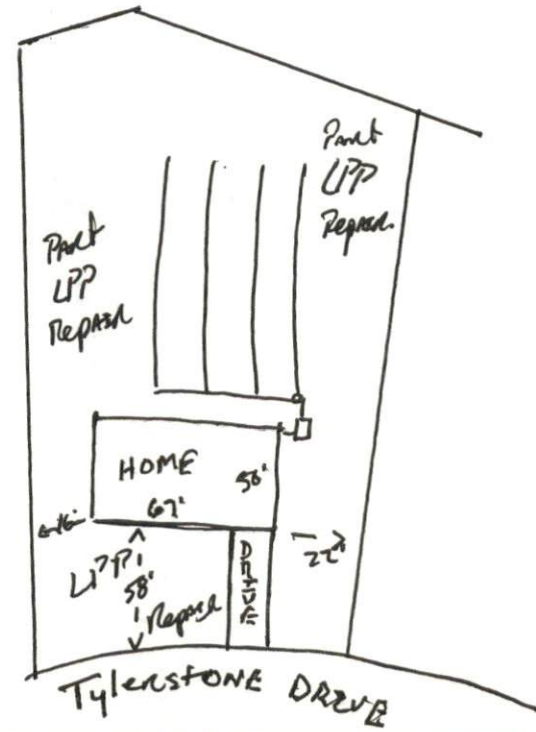
Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field: No. of ditches 4 exact length of each ditch 80 ft. width of ditches 3 ft. depth of ditches 24-30 in.

French Drain Required: - Linear feet Date: 2-11-04

This permit is subject to revocation if site plans or intended use change.

Signed: James E. Marhart @ NS
Environmental Health Specialist



HARNETT COUNTY HEALTH DEPARTMENT
AUTHORIZATION TO CONSTRUCT

T-#04-5-8602

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department, Improvement Permit # 20604. This authorization shall be valid for a period not to exceed five (5) years from the date of issuance. This authorization will be invalid if ownership, site plans, or intended use change.

Name Michael Anderson Homes INC Telephone# 919-552-1790

Address 180 Woodland Ridge DRIVE F.V. NC. 27526

Property Location SR# 1443 Road Name Lafayette

Subdivision V. 14th PH 5 Lot # 163 # Bedrooms Proposed 3 Lot Size 30,760 sq ft

TYPE OF SYSTEM

- New Installation Repair Septic Tank Nitrification Lines
- Conventional Other 25% Reducer
- Basement With Plumbing Without Plumbing

Water Supply: Well Public Water Supply Minimum Well Setback: _____ Ft.

Septic Tank 1000 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 2 # of lines per field 4 Length of lines 80 Ft.

Width of ditches 3 ft. Depth of ditches 24-70 inches

French Drain: Linear feet required _____ Depth of gravel _____

No wastewater system shall be covered or placed into use by any person until an inspection by the Harnett County Health Department has determined that the system has been installed according to the conditions of the Improvement Permit and that a valid Operations Permit has been issued.

James E. Markant
Signature of Authorized Agent for Harnett County of Harnett

2-11-04
Date